

IFW

PTO/SB/21 (04-04)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/802,667
Filing Date	March 16, 2004
First Named Inventor	Xie, Jun
Art Unit	2855
Examiner Name	Lilybett Martir
Attorney Docket Number	020859-002710US

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to Technology Center (TC) |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Return Postcard |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | Remarks | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Townsend and Townsend and Crew LLP	Reg. No. 51,995
Signature	<i>Daniel Mao</i>	
Date	November 4, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Eleanor J. Taylor		
Signature	<i>Eleanor J. Taylor</i>	Date	November 4, 2004

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

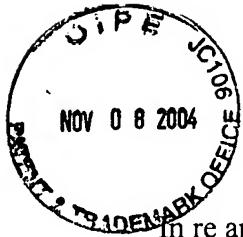
PATENT
Attorney Docket No.: 020859-002710US
Client Ref. No.: CIT-3863

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On November 4, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Eleanor J. Taylor



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Jun Xie et al.

Application No.: 10/802,667

Filed: March 16, 2004

For: INTEGRATED CAPACITIVE
MICROFLUIDIC SENSORS METHOD
AND APPARATUS

Customer No.: 20350

Confirmation No. 2668

Examiner: Lilybett Martir

Technology Center/Art Unit: 2855

RESPONSE TO RESTRICTION
REQUIREMENT AND OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed October 6, 2004, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 13 of this paper.